(DO NOT WRITE IN THIS SPACE)

STATE OF IOWA Credit Union Division

Credit Union Charter Application	
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1.	6.	
2		
4		
5.		
(Type Name under each signature.		
Dated thisday of		
Briefly describe group:		
We have a Common Bond established by Occupation (Employment) Association (Organization) Residence (O	Community)
If among employees, state nature of the firm's business		
Organization Name and Address		
Approximate Number of members		
If among residents of a community, state approximate a	area of territory	
Approximate Number of residents in the area	Location is in the Co	ounty of
Number of persons expected to join the Credit Union in	n six months twelve months	
List one person with whom the Credit Union Division	may correspond/or call/pertaining to this application. (Person listed <i>must be</i> an applicant.)
	Address	Telephone
Name		
Duamagad Nama of the Cuadit Union		
Proposed Name of the Credit Union	_	
Proposed Name of the Credit Union	_	
Proposed Name of the Credit Union	_	

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